J.S. Paleri and Trademark Office; U.S. DEPARTMENT OF COMMERCE

|                                                                                                                            |                                                                                                       |                              |                                             | 101 FOILL FIV                    | 015 Ciletin           | e December 8.      |                             |                         | 711,121   | -                          |
|----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|------------------------------|---------------------------------------------|----------------------------------|-----------------------|--------------------|-----------------------------|-------------------------|-----------|----------------------------|
| APPLICATION AS FILED - PART I (Column 2)                                                                                   |                                                                                                       |                              |                                             |                                  |                       | SMALL ENTITY       |                             | OTHER THAN SMALL ENTITY |           |                            |
|                                                                                                                            | FOR                                                                                                   | HUMBER                       | FLED .                                      | HUMBER                           | EXTRA                 | RATE (S)           | FEE (I)                     |                         | RATE (\$) | FEE(I)                     |
| ASIC                                                                                                                       | FEE                                                                                                   | N/                           | /A<br>/A                                    | N/A                              |                       | N/A                | 150.00                      |                         | NIA       | 300.00                     |
| FARC                                                                                                                       | 1 16(0) (0) @ (c))                                                                                    | N/                           |                                             | , N                              | Α                     | NVA<br>NVA         | \$250<br>\$100              |                         | N/A       | \$500                      |
| YAKI                                                                                                                       | HATION FEE                                                                                            | . NV                         |                                             | N                                | //                    |                    |                             |                         | NA        | \$200                      |
| 7 CFR                                                                                                                      | 1 1610. (p). or (q)).<br>CLAIMS                                                                       |                              |                                             |                                  |                       | X\$ 25 .           |                             | OR                      | X\$50 .   |                            |
| 7.CFF                                                                                                                      | R 1 16(1)<br>ENDENT CLAIMS                                                                            |                              | minus 20                                    |                                  |                       | X100 .             | ·                           | . [                     | X200 .    |                            |
| 7 0                                                                                                                        | R 1 16(h))                                                                                            | = C summ                     |                                             | od drawings ()                   | d drawings exceed 100 |                    |                             | 1 1                     |           |                            |
|                                                                                                                            | CATION SIZE                                                                                           | sheets of p                  | eets of paper, the application size ter one |                                  |                       |                    |                             |                         | -         |                            |
| ### 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).                                                                              |                                                                                                       |                              |                                             |                                  | (60)' 9ec             |                    |                             |                         |           |                            |
|                                                                                                                            |                                                                                                       |                              |                                             |                                  |                       | +180=              |                             |                         | +360=     |                            |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16(1))  If the difference in column 1 is less than zero, enter "O" in column 2. |                                                                                                       |                              |                                             |                                  |                       | TOTAL              |                             | ]                       | TOTAL :   | -                          |
| tf the                                                                                                                     |                                                                                                       |                              |                                             |                                  |                       |                    | :                           | . 1                     |           |                            |
| •                                                                                                                          | APPUC                                                                                                 | A SA NOITA                   | MENDE                                       | D-PART II                        |                       |                    |                             | OR                      | OTHE      | R THAN ,<br>ENTITY .       |
| :                                                                                                                          |                                                                                                       | (Column 1)                   | <del></del>                                 | (Column 2)                       | (Column 3):           | SMALL              |                             | 1                       |           | . ADDI:                    |
| ∢                                                                                                                          | Malar                                                                                                 | CLAIMS<br>REMAINING<br>AFTER | •                                           | NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA      | RATE (\$)          | ADDI-<br>TIONAL<br>FEE (\$) |                         | RATE (\$) | TIONAL<br>FEE (1)          |
| AMENDMENT                                                                                                                  | Total                                                                                                 | MENDMENT                     | Minus                                       | 21                               | •                     | X\$ 25 .           |                             | OR                      | X\$50 _   |                            |
| 퇽                                                                                                                          | independent                                                                                           | 10                           | Minus.                                      | ** 4                             | *                     | X100 =             |                             | <b>⊘</b> R              | X200 _    | <del> -\</del>             |
| 질                                                                                                                          | Application Size F                                                                                    | 60 (37 CFR 1.1)              | 5(s)) ·                                     |                                  |                       |                    | <b> </b>                    | -                       | +360=     | 1                          |
| 1                                                                                                                          | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.160)                                         |                              |                                             |                                  |                       | +180=              | ļ                           | OR                      | TOTAL.    | 12 1 5                     |
| l                                                                                                                          |                                                                                                       |                              | <del>-</del>                                |                                  |                       | TOTAL<br>ADO'L FEE |                             | OR                      | ADO'L FEE | · ا                        |
|                                                                                                                            | •                                                                                                     | (Column 1)                   |                                             | . (Column 2)                     | (Column 3)            |                    |                             | -1                      | <u></u>   | <u> </u>                   |
| <u>a</u>                                                                                                                   |                                                                                                       | CLAIMS<br>REMAINING<br>AFTER |                                             | HIGHEST<br>NUMBER<br>PREVIOUSLY  | PRESENT<br>EXTRA      | RATE (\$)          | ADDI-<br>TIONAL<br>FEE (\$) | .                       | RATE (\$) | ADOI-<br>TIONAL<br>FEE (\$ |
| 뉤                                                                                                                          |                                                                                                       | AMENDMENT                    | Minus                                       | PAID FOR                         | =                     | X\$ 25 .           | 1                           | OR                      | X\$50 -   |                            |
| AMENDMENT                                                                                                                  | Cotofi Library<br>Indipendent                                                                         | •                            | Minus                                       | ***                              | •                     | X100 -             | 1                           | OR                      | X200.     |                            |
| 칢                                                                                                                          | PATCER SARAH                                                                                          |                              |                                             |                                  |                       |                    |                             | 7                       |           |                            |
| ¥                                                                                                                          | Application Size F40 (37 CFR 1.16(8)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(8)) |                              |                                             |                                  |                       | +180=              |                             | OR                      | +360=     |                            |
|                                                                                                                            | FIRST PRESENTATION OF MODITY & CO.                                                                    |                              |                                             |                                  | TOTAL<br>ADDL FEE     |                    | OR                          | TOTAL ADD'L FEE         |           |                            |

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "o' in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or indopendent) is the highest number found in the appropriate box in column 1.

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The "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "20".

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The "High